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AUTHOR	McCarthy, James; Syropoulos, Mike
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ABSTRACT

The primary objectives of the Continuing Education of Girls Who Must Leave School Because of Pregnancy Project (CEG), which is funded under Title I of the 1965 Elementary Secondary Education Act, are to reduce the percentage of female dropouts from Detroit schools via the enrollment of 110 pregnant girls in the project, to have the enrolled girls make normal academic progress in a schedule of classes appropriate for their grade level, and to have the girls return to a regular school following the completion of their CEG classes and their pregnancies and complete requirements for their high school graduation. During the school year, the evaluators made many visits to observe the CEG Project in action. They found it projected a warm, non-censuring climate. The fact that every student at CEG shares a common handicap allows them to provide the mutual support for each other that they need to continue their education. These things combined with a low pupil teacher ratio and the additional supportive services of the project have permitted the girls to resume their classes, begin to restore their self-concepts and self-respect, and revive their educational and career aspirations. Only 14 percent of the CEG girls did not continue their education after their enrollment in the project. Of 292 girls who were enrolled during the 1971-72 school year, 33 (or 11 percent) became dropouts, with the remainder either graduating or returning to school to continue their education. CEG girls achieved a slightly higher honor point average in their CEG classes than they had in regular school. (Author/JM)

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EVALUATION OF THE PROGRAM TO CONTINUE THE EDUCATION OF GIRLS WHO MUST LEAVE SCHOOL BECAUSE OF PREGNANCY

1971 - 1972

By

James McCarthy and Mike Syropoulos

Project Evaluators

U.S. DEPARTMENT OF HEALTH
EDUCATION & WELFARE
NATIONAL INSTITUTE OF
EDUCATION

CONTINUING EDUCATION FOR GIRLS

Nancy M. Bogan
DIRECTOR

The Research and Development Department
Program Evaluation Section
(Funded Under Title I, ESEA)
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BACKGROUND OF THE PROJECT

The Problem of School Age Pregnancies

An early teenage pregnancy is one of the highest risks to be found in any community. At stake are the lives of both the mother and child; their future health; their social and psychological adjustment; the mother's continued education, and her vocational potential or her economic dependency should she choose to receive Aid to Dependent Children rather than return to school.

Medical statistics show that unmarried mothers die more frequently than married women. Medical research has found that when a mother is under 16 years of age, there is an increased incidence of medical complications such as excessive weight gain, increased incidence of toxemia, prolonged labor, and an increased incidence of prematurity with a resultant increase in morbidity and mortality in the child.

Historically, the social agency of prime significance in the life of a teenager has been the school. Disadvantaged students and their parents have traditionally come to their school for help or advice in regard to many types of problems. Unfortunately, there was one problem area in which the school would not attempt any remediation. Whenever a girl's pregnancy became known, she was forced to withdraw. This punitive, short-sighted practice of the school first resulted in the teenager attempting to conceal her condition as long as possible. Secondly, after her forced withdrawal from school, the average teenager saw no need for early prenatal care or if she did, the early months of her pregnancy probably had already passed.

Fortunately for Detroit's teenagers, a group of responsible citizens became interested in what might be done to find solutions to the problem of female dropouts due to pregnancy. These community leaders petitioned the board of education to develop a special school program for pregnant girls.

The board's response was the Continuing Education of Girls Who Must Leave School Because of Pregnancy Project (CEG) which began in 1966.

DESCRIPTION OF THE PROJECT

Project Objectives

Detroit's 1971-72 Elementary and Secondary Education Act, Title I Proposal lists the following primary objectives for the CEG Project:

1. the percentage of female dropouts from Detroit schools will be reduced by the enrollment of 110 pregnant girls in the project

2. the girls will enroll and make normal academic progress in a schedule of classes appropriate for their grade level

3. after the completion of their CEG classes and their pregnancies, the girls will return to a regular school and complete requirements for their high school graduation (unless as seniors, they graduated from the project).

The evaluation design performance objective stipulated that 90 percent of the girls enrolled in the project would have to make normal progress in their CEG classes and return to regular school (or graduate) for the successful attainment of the project objectives.

In order to achieve these objectives, the proposal lists the following services to be provided to the CEG students:

A. Educational Services and Conditions

1. Students will be grouped and scheduled for courses according to their individual curricular needs. The curriculum prescribed by the Detroit Public Schools will be used.

2. Classes will be multi-graded and flexible with the individualized teaching, group teaching, and team teaching.

3. Additional courses outside of the regular public school curriculum will be offered and will generally relate to the following areas:

   a) citizenship
   b) social customs
   c) standards of behavior
   d) human needs and drives
   e) infant care and child rearing

4. Two homebound teachers will provide educational services during the period of confinement.

B. Social Services

1. Enrollees will be provided with the services of a social worker.

2. Such services will include making the initial interview with the enrollee and her parent(s).

3. Arranging for medical and psychiatric consultation and psychologicals.

4. Obtaining data and compiling a social history on each pupil.

5. Visiting the home, making a home study, and counseling the parent where such consultation relates to CEG student's welfare.

6. Making diagnostic evaluations.

7. Helping the girl with child care or adoption arrangements.

8. Helping to determine the readiness of the student to return to regular school.

9. Assisting classroom teachers with behavioral management skills.

10. Acting as a liaison between school personnel and families.

11. Assisting girls in parent-child, sibling, and social relationships.

12. Offering individual and group counseling to the school age fathers.

13. Arranging for recreational group activities.

C. Health Services

1. Enrollees will be provided with medical services.

2. Such services will include medical screening of each pupil.

3. Regular clinic attendance as part of the prenatal care program.

4. Making preparation for delivery and postpartum care.

5. Arranging for treatment of other identified health problems.

6. Encouraging early registration of infant in neighborhood health clinics for health supervision and protective immunization.

7. Offering of courses in sex education.

8. Conducting of Red Cross First Aid Course by representatives from American Red Cross.

D. Psychological Services (Contracted)

1. Enrollees will be provided with the services of a psychiatrist on a limited basis.

2. Such services will include consulting with staff regarding guidelines to be used in working with pregnant girls who have some identified pathological characteristics.

3. Providing psychiatric evaluations on individual girls.

4. Arranging for psychotherapy with a community agency, where psychotherapy is needed on a regular basis.

F. Recreational Services

Arts, crafts, trips and other activities both in the center and in the community will be provided.

G. Transportation Services

1. Students will be expected to furnish their own transportation, but in instances where the student is unable, bus fare can be obtained for this purpose.

2. Cab fare will be available for students in the late stage of pregnancy.

3. Cab fare for emergencies will also be made available.

H. Consultation Services

1. Various departments within the school system will be consulted whenever necessary to get the advice of specialists in specific fields.

2. Various community agencies will be available for consultation services, such as, M.E.S.C., Family Service, etc.

I. Practicum Experience

Graduate students and upper-class undergraduate students from local higher educational institutions will be involved in practicum experience with the project. They will assist in the family life education program and will offer social work services (limited), health and medical education (Wayne State University Medical School Department of Community Medicine and School of Nursing).

J. Staff Development

1. An orientation program for staff will be held with experts from various academic fields.

2. Periodic meetings will be held with the staff and a psychologist and/or psychiatrist.

3. Weekly multi-discipline staff meetings will be held for case clinics.

4. Special workshops for total staff as well as smaller workshops for each discipline will be held.

K. Advisory Committee

Representatives of the community (agencies and citizen groups) meet monthly to contribute suggestions and ways to bridge gaps in service and open new areas of resources.

L. Services for the Parent(s) of Pregnant Girls

Group discussions and activities will be held for parents.

The Multi-Disciplined CEG Model

The CEG model is a team approach which includes representatives of those disciplines which can be of the most assistance to pregnant teenagers. The CEG staff consists of:

1. the director

2. a half-time counselor and half-time teacher

3. six full time teachers

4. two teachers of homebound students

5. two social workers

6. a part-time psychologist (two days a week)

7. three teacher aides

8. one stenographer and two clerk-typists.

The Evaluation Design

The plan for the evaluation of the CEG Project called for the investigation of the effectiveness of the project in achieving its primary objectives by the following:

1. an examination of project records regarding: courses completed, grades, credit hours, attendance, tardiness, honor point averages, and the number of girls who either returned to regular school or graduated from the project

2. interviews with CEG students

3. a questionnaire sent to former CEG students

4. interviews with project staff members.

EVALUATION FINDINGS

Dropout Prevention

The project performance objective was to have 90 percent of the CEG students, 110 pregnant junior and senior high school girls, continue their education during pregnancy, and either return to regular school or graduate from the project.

The academic school year for the CEG Project has three sessions:

1) the first semester, September to January

2) the second semester, February to June

3) the summer session, June to August.

A total of 292 girls were enrolled during the three sessions. A total of 33 girls or 11 percent became project dropouts and did not return to regular school or graduate from the project. Thus, the CEG Project failed to achieve its objective by only 1 percent.

The total CEG student academic performance for the 1971 - 1972 school year is shown in Table 1.

Table 1

Marks And Honor Points Earned In Credit Courses By CEG Students During The 1971-72 School Year

Marks Earned In Credit Courses		Honor Points	No Credit Earned
A's	200	800	-
B's	353	1,059	-
C's	356	712	-
D's	218	218	-
E's	-	-	244
Dropped	-	-	75
Totals	1,127	2,789	319

In Table 1 above, the CEG students earned credits in a total of 1,127 classes. The total includes 945 five hour credit classes and 182 two and one-half hour credit classes. Thus, the total number of credit hours earned towards high school graduation by the students was 5,180.

The maximum total possible for the project students was 5,858. This figure is based on a normal 22½ hour schedule for each of the 197 students enrolled for the fall and spring semesters and 95 students enrolled for a 15 hour schedule during the summer session.

Since the 5,180 total is 88 percent of the 5,858 possible total, it means that the project failed by two percent to achieve its goal that 90 percent of the students would make normal progress in the project courses.

The mean honor point average for the 1971-72 CEG school year based on the Table 1 data would be 1.9. This is above the girls' mean honor point average of 1.6 for their last semester in regular school (see Table 2).

In summary, the data show that while the exact percent set in the performance objective of the research design for the project was not attained by the project, it can be said that the goal was attained to a most substantial degree, and with a slightly higher honor point average than the girls had in regular school.

CEG Honor Point Average, Attendance, and Tardiness Records

A sample of 50 girls was selected by the evaluator from the newly enrolled students in September, 1971. At the end of the semester, their CEG performance was compared with their previous semester's performance in regular school.

Table 2

A Comparison Of A Sample Of 50 CEG Students
With Their Previous Performance
In Regular School

Students N = 50	Mean Number Of Days Absent	Mean Number Of Times Tardy	Honor Point Average
While in the CEG Project	13.04	2.14	2.13*
While in last semester of regular school	16.82	4.14	1.63

*Computed on N = 40 because 10 girls were dropped and did not receive final marks.

In Table 2 above, the girls' CEG performance exceeded their regular school performance in all three areas measured. They were absent 3.78 days less, had 2 less tardinesses, and increased their honor point average by .5 of a point.

CEG Student Interviews - 1972

A series of four group interviews was conducted by the evaluator on April 17, 1972. The total number of students interviewed was 27. The sample was stratified by grades: nine were in grade 12; nine were in grade 11; five were in grade 10, and 4 were in grades 7, 8, and 9.

The first topic discussed with each group was, "Since the new state law allows a pregnant student to remain in regular school, why choose to enter the Continuing Education for Girls Project?" According to all the groups, their primary reason was safety. Three groups mentioned their fear of being knocked down in the hallway if they remained in regular school. Two groups mentioned a fear of falling down stairs or being involved in a fight between other students in a regular school. Two of the groups said one of the reasons they had chosen CEG was its Homebound Program. They feared they would not be able to keep up in regular school during the long absence at delivery time. Other reasons given by single groups were: CEG has a nurse; there is a nursery here; the free breakfast, lunch, and transportation; the chance to meet other girls in the same situation, and "the privacy from other students during a time when I feel different from the students at a regular school."

The second topic discussed with the students was "Are you happy with your choice of CEG? Why or Why not?" All of the four groups said that they were happy at CEG. Two groups expressed their feeling that "You learn more here and you learn easier and quicker because of the small class size and time to talk to the teacher more." Two groups mentioned free lunch and bus fare. Other items mentioned by

a single group were: girls who aren't feeling well have a place to lay down or are allowed to go home; girls are excused for clinic appointments; and there are field trips to get information on jobs.

The only negative responses were the lack of males in class and the hard chairs.

Third topic discussed with the students was their transportation to school. Since some girls living on the east side had to ride on two or three bus lines to get to CEG classes, the girls who had to travel a greater distance to CEG than to their regular school were asked if they thought the extra travel was worthwhile. Seventy-nine percent stated that they would rather ride further on the bus to be able to come to CEG classes.

Analysis of the CEG Student Group Interview Responses

The responses show that despite the new state law which allows pregnant girls to remain in regular school classes, there is a great number of girls who would choose a separate program like CEG if they had a choice. The positive tone of the responses indicates that the project has been successful in meeting most of their needs.

The Former CEG Student Questionnaire

A source of expert information about the worth of any project is the participants. This is especially true when they have been out of the project for a period of time and have the added maturity and experience to render more objective judgements.

This questionnaire was mailed to a sample of 100 former students of the CEG Project who had been enrolled in the project from 1966 to 1971. Many of the questionnaires were returned unopened because the girl had moved. The total number of completed questionnaires returned was 48.

The questions and responses were as follows:

Question #1: Did you graduate from the CEG program?

Yes	11	23%	No	37	77%

Analysis of Question #1 Responses

The percentage of graduates who returned their questionnaires seem to be higher than their actual representation in the project. This may be because some of the same characteristics which cause a person to graduate may also result in their returning research surveys such as this one.

Question #2: Did you return to regular school from the CEG program?

Yes	29	60%	No	11	23%	No Response	8	17%

If Yes, (Check below)

10% are presently in regular school

17% have returned to school but dropped out later

33% graduated from high school

8% attend night school

Comments: Why did you drop out of school?

A total of 16 girls supplied their reason for dropping out: 44 percent said it was another pregnancy; 31 percent said it was a lack of a babysitter; 19 percent said they left to enroll in another educational program; 6 percent said it was for personal reasons.

Analysis of Question #2 Responses

The percent of girls who returned to school (60) plus the percent who graduated from the project (23) results in an 83 percent success record for the project. The comments show that another 10 percent are still in school and working towards graduation while another 10 percent have graduated since their return. There is also an eight percent group of students enrolled in night school classes who may also be graduating in the future.

Question #3: Did you drop out of the CEG program?

Yes	7	15%	No	35	73%	No Response	6	12%

Analysis of Question #3 Responses

The percentage of dropouts seem slightly higher than their actual representation in the project. Possibly, these respondents were motivated by a desire to explain their action and returned their questionnaires for this reason.

Question #4: If dropout, what caused you to drop out of the program?

Not interested	1	Enrolled in high school	3
Child care problem	4	Family problem	2
Other reason	4		

Analysis of Question #4 Responses

According to the responses, there is a small percent of CEG dropouts who eventually re-enroll in school.

Question #5: If graduated from high school, are you furthering your education?

Yes	19	59%	No	13	41%	How

A total of 18 girls replied: 50 percent were attending college; 45 percent were attending a trade school; 05 percent were attending night school.

Analysis of Question #5 Responses

The information given by the girls who have graduated indicates that everyone of them is continuing her education beyond high school either in a college or a trade school and either as full-time students or part-time students who are employed full-time. This 100 percent quest for additional education or training by this sample of CEG graduates reflects favorably on their motivation and career aspirations which can be attributed in some degree to their having been in the CEG Project.

Question #6: What is your present marital status?

Single	30	62%	Married	9	19%	Divorced	2	4%
Separated	6	13%	Widowed	0	00%	No Response	1	2%

Analysis of Question #6 Responses

The percentages seem to be normal for this age group with the majority of the girls remaining single.

Question #7: Are you: Gainfully Employed? 11 23% On ADC 2 4%

On Welfare	4	8%	Other	16	34%	No Response	15	31%

Analysis of Question #7 Responses

Considering that the burden of raising a child has been added to every CEG girl before she has graduated or developed a saleable job skill, the fact that less than ten percent report that they are dependent upon public aid appears to be a real tribute to them and the CEG Project. Since most of the girls who were in the "Other" category are still completing their educations, it is unlikely that many of them will become public aid cases.

Question #8: If employed, what type of work?

Of the 11 girls who were employed: 44 percent were office workers; 18 percent were in nursing; 18 percent were telephone operators; 10 percent were cashiers; 10 percent were restaurant workers.

Analysis of Question #8 Responses

Apparently, the occupations listed are the ones most open to CEG girls at this time on the basis of their preparation for the World of Work. The project staff should take this into consideration in their vocational counseling and in planning future curriculum modifications.

Question #9: Are you having any difficulties rearing your baby

Yes 5 10% No 35 73% No Response 8 17%

Comments:

A total of 16 girls gave comments: 38 percent needed a day care center; 38 percent needed no assistance; 18 percent had assistance at home; 06 percent had utilized adoption. Examples:

> "My Steven will be four years old in January, 1972. He is a very bright child and has adjusted well, we both live together in my apartment."
>
> "No difficulties at all, I'm proud of her and she is growing up to be a real young lady, she is almost four years old."
>
> "He doesn't talk too well and he is three years old. I would like for him to be with other children, like in a nursery."

Analysis of Question #9 Responses

The girls' replies show a definite need for such day care centers on a continuing basis. The CEG staff should be alert to support any proposals by other agencies to establish such centers.

Question #10: Would you use an infant group care center if a good one was available in your community

Yes 28 58% No 18 38% No Response 2 4%

Comments:

A total of 23 girls supplied comments: 34 percent needed one now; 32 percent will need one later; 14 percent could see no need for one; 10 percent said it would depend on the cost; 10 percent said the grandparents took care of the baby.

Example: "She is a little young to be in an infant care center, but I would let her go because she can learn more that way."

Analysis of Question #10 Responses

Since over 50 percent of the girls replied that they would make use of such a center, it can be said that a definite need exists and the CEG staff can alert the girls if such centers are opened by another agency during the year.

Question #11: Why would you place your child in the infant group care center

A total of 23 girls replied: 43 percent said he would learn more with other children; 26 percent said because they were working; 13 percent said because the relative who is babysitting for them needs a rest; 13 percent said if the center had high standards; 05 percent said only as a last choice. Examples:

> "I could go to work or school feeling that my son is well taken care of. I know he would learn a lot from there and could have the pleasure of playing with other kids his own age."
>
> "So that my mother can have a rest."

Analysis of Question #11 Responses

The girls supplied many good reasons as evidence of their need for such a center.

Question #12: Who is caring for your baby while you are in school or work?

Neighbor	3	6%	Mother	18	38%	No Response	15	31%
Other	12	25%	If other, who					

The others mentioned were: aunts, grandmothers, sisters, in-laws, a cousin, and a great grandmother.

Analysis of Question #12 Responses

Some of the children are undoubtably receiving excellent care from their sitters. However, at the other end of the scale, there may be some who are being neglected. The availability of a day care center would tend to diminish the possibility of poor care for some of these children.

Question #13: Could you use a neighborhood counseling center where you could get advice on child rearing problems or any other problems that teenage parents might have after leaving the CEG program?

Yes	16	33%	No	23	48%	No Response	9	19%

Examples: "Not on the child rearing problems too much, but the marriage problem. Yes, I believe I could see somebody to give me advice on child rearing. If you know the address, I would appreciate it if you would please send it to me."

"So I may get advice, and check-ups for the baby, also vitamins. Where can I get her teeth checked?"

Analysis of Question #13 Responses

Based on the replies, there is a definite need for it now. In view of our complex society, one can predict that at some future time, they will probably be in need of such help.

Question #14: Now that you have been away for some time, do you believe that the CEG program was:

Very helpful	86 Percent
Much help	04 Percent
Helpful	06 Percent
Not helpful	02 Percent
No response	02 Percent

Comments:

A total of 40 girls furnished comments: 36 percent said they were able to continue their education because of the project; 22 percent said they received individual attention in the project; 14 percent said they received assistance with their problems from the project; 14 percent said the project kept them from feeling ashamed; 05 percent said the project helped them make new friends; 05 percent said the project made it possible for them to graduate; 02 percent said the project helped them get into college; 02 percent said the project helped them get a job. Examples:

"It was very helpful because we could go to school and when we went back to regular school we could graduate on time."

"I learned more, and got along better."

"I think it is a big help to the community because it gives girls a chance to continue their education."

"It made me very aware of how much more I was learning than when I was in regular school."

"I am so glad that I had an opportunity to go to school while pregnant. It helped me a great deal to receive my diploma."

"CEG was very helpful to me in a lot of ways. If I hadn't gone to CEG, I would have never gone back to regular school."

"I believe it was helpful because with a program like this I may have never returned to school. I really didn't become interested in school until I became pregnant. Then I wanted more for my child."

"It kept us from being ashamed and gave me my first real job. We learned many different things and most of all we were all proud of our babies."

"I learned a lot about raising children and how to get along with others."

"I liked the program. It was the best thing that happened to me when I became pregnant because I was glad to meet girls with the same problems and not be made to feel uncomfortable."

"By going, I was able to continue my education. I am sure that I would never go to night school. I was also able to cope with my problems. It was good to see that I wasn't the only one pregnant. It was also good to see that I was almost the oldest one there. From talking to the doctors when they came to visit the school, I felt better about delivery. I also met some new friends many of whom I am still in contact with."

"Teachers and faculty members were nice and understood some of the problems others don't. They also took time to explain the lessons that were broken down very easily."

"The CEG program has taught me many more things than I have learned in public school. I can still remember the many useful small things."

"If I hadn't heard about CEG, I wouldn't have progressed as far in school as I did. I had made up my mind never to go back to school."

"If it wasn't for the school, I know I would have never finished regular school. The school is very helpful so please continue the program for other girls. Thanks a lot."

Analysis of Question #14 Responses

The project was rated from "Helpful" to "Very Helpful" by 96 percent of the former CEG students which is indicative of a high degree of support for the project.

Question #15: In your opinion what can be done to make the CEG program better?

A total of 37 girls expressed their opinions: 44 percent said don't change anything. Examples:

"Well, I don't really know because I think it is just fine the way it is. I think it is wonderful the way the teachers are able to satisfy everyone. I would rather be there than in regular school because at CEG, you feel wanted and very important and you learn a lot. Don't change anything."

"I think CEG is a very good place for a girl who is in need of knowing about child care and who needs to finish school. I don't think they need to improve the school, it is good the way it is."

"To tell the truth, CEG cannot be improved. It is a wonderful school and I hope they keep up the good work."

"I don't think there is anything to be done to make it better. What more could a pregnant girl or woman want?"

"To me the school is perfect. Nothing is needed. Thank you for helping me out."

Thirty-seven percent said it needs more of something. The girls mentioned: more locations, job training, more subjects, more social workers, more homebound teachers, more counseling for fathers, more girls, and more supplies for the babies. Examples:

"I think there should be more CEG programs surrounding the Detroit area where the girls could be able to get to and from school."

"CEG needs more classes. A full-time babysitter for the girls that have to bring their child. A supply of baby food on hand just in case of an emergency."

Thirteen percent said a regular nursery was needed, 06 percent said let girls continue in CEG until they graduate.

Analysis of Question #15 Responses

The former students sum up the project as being very good as it is presently organized. They indicate that the best directions for it to change would be to grow into larger dimensions or to break up into local branches for better accessibility to its students.

CEG Staff Interviews

The evaluator interviewed the CEG social workers, homebound teachers, psychologist, nurse, and academic guidance counselor to determine the progress made in each area and to obtain their suggestions for any needed changes.

The CEG Nurse

As a result of a cooperative arrangement with the Detroit Department of Health, Maternal, Child, and School Health Division, a city nurse visits the girls at school three days a week. Through weekly group discussions every girl is instructed in the health practices she should be following in regard to diet, nutrition, exercise, and hygiene in preparation for delivery. The girls are also able to see the nurse on an individual basis. The nurse follows up any health problems that develop by making sure the girl obtains prompt medical care from her doctor, clinic, or hospital.

The Homebound Teachers

These two teachers visit the girls who are unable to attend classes due to complications, their delivery period, or the post-delivery period. Prior to the home visit, the homebound teacher consults the girl's regular teachers and obtains lesson assignments for the girl. At the home, the teacher looks over the completed assignments from the last visit. If they are acceptable, she takes them back for the regular teacher to evaluate. Then, the girl is given whatever instruction is necessary for the completion of her new assignment. During the home visits, the teacher gets to know the student on an individual basis, meets her family, and understands the home conditions. Often times, the teacher will be called upon to render guidance and counseling to the girl and/or her family. Sometimes, emergency assistance is rendered such as a dime to call the doctor or some clothes for the baby. When a girl is found to have a serious problem, a project staffing conference can be called. All project staff members working with the girl share their information, and decide on future steps together so that the project's efforts to help the girl are fully coordinated.

The Academic Guidance Counselor

This is the first year that the project has had a counselor. The project's enrollment is not large enough for a full time counselor so the counselor teaches three classes and utilizes the rest of the schedule for guidance activities such as student scheduling, college scholarships and acceptance, career related field trips, coordinating student work-study programs in cooperation with the Junior High Work Training Project and the In-School Neighborhood Youth Corps Project, and individual and group counseling.

The Psychologist

This position is a part time one with the project. The psychologist was on a two days a week schedule. Various batteries of group and individual tests were administered to the students to determine their strengths and weaknesses in the emotional, educational, and vocational areas. The staff utilized the test results to plan programs for the girls which would ensure that each girl received the assistance she needed to achieve personal success while in the project.

During November, 1971, the psychologist surveyed the girls regarding the things they liked best and least about the project. The results were as follows:

Things Liked Best

Free food	26
Free transportation	14
Understanding teachers and staff	32
People easy to get along with	11
Being with other pregnant girls	8
Chance to finish school	7
Homebound work	6
Classes	8
Easier to learn	3
More time to finish work	3
Small class size	3
Jobs are available	2
School hours	-
Teacher Aides	-
More freedom than regular school	-
American history teacher	-
Civics class	-
Math	-
Typing	-
English	-
Black History	-
Sewing class	-
Able to bring baby to school	-
Clean bathrooms	-
Teaching the birth process and child development	-

Things Least Liked

Hours are too long	13
Nothing	9
No smoking	7
Getting out of school at 2:40	6
Some of the girls' attitudes	6
No boys	4
No salt	4
Too far to come	4
Getting up too early	4
Lunches	4

Things Least Liked (continued)

A teacher's attitude	3
Not enough classes to choose from	3
Basement rooms	2
Lunchroom too small	2
Needs more chairs	2
Boring	2
Study periods	2
Homework	2
Not able to use phone	2
Too strict	-
Some teachers	-
Typewriters are too slow	-
Cannot go home anytime	-
Economics	-
A teacher	-
Not learning	-
Lack of books	-
Black History	-
Black Literature	-
Cannot carry 25 hours	-
Cannot go to other parts of the building	-
Not enough teachers	-

The Social Workers

The project's two social workers see the girls in group sessions and individually. They have found that as they attempt to assist a girl with her problems, they are usually confronted with the necessity of first seeing that the family's basic needs in regard to food, shelter, and clothing are taken care of before they can begin assisting the girl with her personal problems.

Unfortunately, they see a trend developing where more and more teenage parents are attempting to solve their problems by leaving their family home and establishing a separate residence financed by public aid. The current policy of Social Service caseworkers is to allow girls as young as 16 (and in unusual circumstances 15) to enroll as a separate case and establish an independent household. The CEG Project social workers usually counsel girls against this course because: (1) the girls usually lack the maturity needed for the assumption of total family responsibilities; (2) once they are on their own with no mother to insist on their school attendance, many will follow the line of least resistance and drop out of school; (3) the extra responsibility of a baby and a house will be too much emotional stress for some girls to take alone and they may become easy targets of unscrupulous persons in the community.

To further illustrate exactly what dimensions there can be to the case of a pregnant school girl in the CEG Project, one of the social workers has selected the following case studies from her 1971-72 CEG caseload:

Mary S. is a 17 year old senior due to graduate from high school in June of 1972. Mary delivered in September, 1971. Academically this student is bright. Personality wise, she is quite verbal and appears increasingly to behave as if

she has a chip on her shoulder. Having delivered in September, this is a student who could have returned to her regular high school at the beginning of the winter semester but one we encouraged to remain with us because of her unstable situation.

Mary had been a ward of the court since age 15 and is quite familiar with foster homes. Her mother resides in another city, her father is said to live in Detroit. At the time she registered at Continuing Education for Girls, Mary was residing in a foster home.

When Mary came home after her baby's birth, she came home alone. The child, a girl, had been born with tumors on her left eye. As Mary described her baby to me, she stated, "When they brought her to me I screamed." The baby is indeed a sight that would be difficult for even the strong to observe without feeling weak in the knees.

At age 17, Mary was released by the court. She remained with her foster mother until she left in anger at the foster mother's words, "I cannot stand to look at the baby." She then moved in with the baby's father's mother. The baby's father attends college out of state. Mary allowed the paternal grandmother to become legal guardian of the baby in order that she could take the baby back and forth to the hospital for treatment, thus, making it unnecessary for Mary to miss school.

Initially, Mary talked of an operation that would cure her baby, but after the hospital discontinued cobalt treatments and said that an operation was useless, Mary is waiting for her baby to die. During the past few months Mary's behavior has been quite erratic. Perfect school attendance became spotty, an argument with the baby's grandmother led her to abruptly leave that home and move in with friends. Her attitude in school has been flippant. She has placed a scholarship in jeopardy by breaking appointments with the university she is to attend. Mary says she is going to finish high school, she is determined she must. She simply has to, she will be the only one in her family to graduate.

Ann D., age 17, is an 11th grade student. She is waiting for her baby to be born. Both her parents are dead and Ann and two siblings reside with their maternal grandmother. Ann is not well liked by her peers in school. They describe her as a know it all, one who dominates every conversation. Ann has described herself as having been spoiled by her grandmother and boasted of always getting what she wants.

Recently, we learned that Ann and her grandmother are completely at odds. Her grandmother has asked her to leave as she says she cannot tolerate Ann's demanding behavior. According to the grandmother, Ann is critical of the food at dinner time, wishes extra things to eat and drink that the grandmother considers unnecessary. She tells her how she should manage the ADC check, also she tells her how to deal with a daughter who lives upstairs.

The grandmother refuses to tolerate this any longer. In discussing the problem, the grandmother becomes almost hysterical. She informed the public assistance worker that she wanted Ann out of the grant [sic] and out of the home. Ann says she is not interested in resolving their differences. Ann has been removed from the grant, given a welfare food order and advised that as soon as she finds suitable housing she can move out. Ann is eight months pregnant. The baby is due sometime in May. She must hurry and find a place to live before she becomes incapacitated. She has no idea as to how to even begin looking.

The preceding examples make quite evident, the fact that the pregnant teenager is often faced with problems so big that she in fact, refuses to face them.

Realistically, in a school setting such as Continuing Education for Girls, there is little opportunity for the social worker to utilize the one-to-one relationship with not much more than a smattering of the school population. With two social workers servicing 120 students, we find that crisis intervention is the only workable mode of operation on a one-to-one basis.

In order to reach the entire school population, we utilize group sessions by grade on a once a week basis to handle topics that are of universal interest to these students.

In these group sessions, we find it necessary to be a source of information as students bring up questions about concrete things such as "How can I get public assistance to support my baby." "How can I get a sitter for my baby when I have no money." "How can I get child support for my baby." "How do I establish paternity for my baby." Or just plain old questions about school itself. In answering these type questions, we may talk to the student but by and large during the group sessions, we talk with the students as they talk with each other in an attempt to tackle problems they are all familiar with. Shy with each other early in the semester, a third of the way through, you may hear a student say to the group, "What do you do when your mother says you cannot go on a date because you've got to take care of your own baby, that she cared for all week?" And the group responds.

We find these group sessions very helpful as the girls learn that there are others with problems just as big as theirs and with just as little knowledge about solving them. We also make home calls, perhaps because of a referral by a teacher or the psychologist. However, routinely we see each student while she is homebound either waiting for the birth of her baby or after it has been born. This gives us an opportunity to meet the parent of the student, discuss her adjustment at home as well as school and evaluate her functioning.

Indeed, the pregnant teenager comes to us with health problems, financial problems, the fear of motherhood and oftentimes, a broken heart.

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RECOMMENDATIONS

This evaluation of the CEG Project found the CEG Model Educational Program for Pregnant Girls to be working well and achieving its objectives. Therefore, no major changes are recommended. However, there are some minor adjustments which could strengthen the project and improve its performance in some areas if the ways and means can be provided to finance them:

1. <u>In-Service Training for the Guidance Counselor</u>

   A beginning counselor at a large high school can consult with more experienced counselors. Since this is not possible for the CEG counselor, the evaluator suggests that an arrangement be made with an experienced school guidance counselor for some in-service training. An ideal possibility would be

the Title I Developmental Career Guidance counselor at Kettering High School who could share their mode of guidance regarding scheduling student programs, work-study arrangements, college scholarships, and career speakers and field trips.

2. Emergency Delivery Procedures

The CEG staff has never been called upon to assist in the actual delivery of a baby. However, if a student should go into labor while at the school and deliver before she can be taken to a hospital, what steps should the staff take in such an emergency? Perhaps, the Division of Maternal, Child and School Health could be called upon to provide the staff with a workshop on this subject.

3. Male Staff Member

At present there is no permanent male staff member in the CEG Project. During the year, the project obtained the volunteer services of a male first aid teacher on a once a week basis. There was also a male social work student from Wayne State University School of Social Work who did his practicum with the school age fathers in the CEG Project in the area of employment.

The evaluator suggests that the project endeavor to secure the service of a male staff member in a permanent assignment.

4. The Homebound Teachers' Supplies

The homebound teachers must carry a large assortment of textbooks and school supplies on their home calls. The efficiency of their service could be improved by providing them with a large case such as salesmen use to carry all their equipment. In addition, if the case could display in large letters: DETROIT BOARD OF EDUCATION HOMEBOUND SERVICE; their reception and security in some neighborhoods and situations might be improved.

5. Petty Cash for Emergencies

After the delivery of the baby, emergencies frequently occur in which a girl needs baby clothes, a crib, a dime to call the doctor, etc. In the past, many staff members have often supplied what was needed out of their own pocket. The evaluator suggests that the project consider whether they should endeavor to increase the emergency fund which was established for such situations.

CONCLUSION

During the school year, the evaluators made many visits to observe the CEG Project in action. They found it projected a warm, non-censuring climate. The fact that every student at CEG shares a common handicap allows them to provide the mutual support for each other that they need to continue their education through a difficult period. These things combined with a low pupil teacher ratio and the additional supportive services of the project have permitted the girls to resume their classes, begin to restore their self-concepts and self-respect, and revive their educational and career aspirations.

The CEG Project was begun for the express reason of preventing dropouts. Each year, it has performed well in achieving this goal. Last year's statistics showed that only 14 percent of the CEG girls did not continue their education after their enrollment in the project.

This year's performance objective for the project was to have 90 percent or more continue their education, thus cutting the project's dropout rate to 10 percent. The statistics for the 1971-72 year show that the project came within one percent of achieving this objective. The data show that of 292 girls who were enrolled during the school year, 33 or 11 percent became dropouts, with the remainder either graduating or returning to school to continue their education.

In conclusion, the price paid for the education of girls with the handicap of pregnancy like the price of all special education programs is higher than that paid for normal students. However, when one considers what the eventual price our community will pay in other services if pregnancy is allowed to interrupt, and in most cases, terminate their formal schooling, the inevitable conclusion is that it was money well spent.